



Global Health
Development

Minimize vaccine hesitancy and create demand for vaccination in low performing provinces in Afghanistan

Project Information

- ◆ Department: Public Health Programs
- ◆ Unit: Polio and Immunization

OBJECTIVES

The main objective of this project is to minimize vaccine hesitancy and create demand for vaccination in Afghanistan through engaging community and religious leaders, developing and disseminating context based IEC materials and voice messages, and building the capacity of frontline health workers on Interpersonal Communication.

BENEFICIARIES

The project's main beneficiaries are the caregivers of under five children in low performing provinces.

REGIONS OF WORK

This project will be implemented in Afghanistan, particularly in low performing provinces (such as Farah and Nooristan) reaching as low as 10%.

PROJECT DESCRIPTION

To achieve this objective GHD will focus on the following target groups:

1. GHD will engage religious and community leaders to build trust between community and immunization program
2. GHD will develop and disseminate the context-based IEC materials and voice messages to raise the awareness of the community
3. Build the capacity of frontline workers (vaccinators) on IPC to encourage the caregivers to contact the health facility on the following due date.

So, GHD will develop the training curriculum and will provide technical assistance to develop the training material during the first quarter of the project. For successful implementation of this activity, GHD will assign an influential religious scholar to explain the benefit of vaccine from the religious point of view. Additionally, around 25 one day orientation workshops for religious leaders and community elders will be conducted in mosques/hujras of underserved communities during the second and third quarter of the project to build trust between community and immunization program. These underserved communities will be selected based on the routine immunization data in close coordination with NEPI manager.

Likewise, the already developed pictorial and voice messages will be updated in the first quarter and disseminated to the target population. Pictorial health messages will be printed, and voice messages will be disseminated to the targeted population through mobile phones, considering the previous project experience the four main companies with high coverage in the targeted areas will be contracted to send the voice messages.

Additionally, the country team through experienced trainers will conduct 15 formal training sessions on IPC, each targeting 25 frontline immunization workers in low performing provinces in the second and third quarter of the project.

Project Start and End Date	August 1, 2022 – July 31, 2023
Partner Organizations	-
Funded by	Centers for Disease Control and Prevention (CDC).
Collaborators	Ministry of Public Health (MoPH), National EPI program.



PROJECT PHASES

The project involves two main phases:

Phase I: Preparation: contract the consultant and assign influential religious leader.

Phase II: Implementation: Conduct orientation workshops for religious leaders in underserved communities to support immunization agenda. Develop, print and distribute health messages.

Currently . . .

The EPI coverage data reveal that a huge gap in vaccine coverage among provinces, nomads and between poor and wealthy households exists. Furthermore, not more than 22% coverage of Penta 3 has been reached among the Kuchi nomads. A significant gap in vaccine coverage between poor and wealthy households exists. Moreover, 18.3% of children were never vaccinated with any antigen. Current strategies used to raise awareness include printed materials, such as brochures, leaflets, banners, billboards, and messages communicated through media outlet i.e TV channels, radio stations and health educations through health facilities. These interventions are often ineffective because approximately 75% of the Afghanistan population lives in rural areas, and a majority of them does not have access to TVs and radios or are illiterate and cannot read printed messages

What is next . . .

GHD through this project will use innovative and culturally acceptable interventions that generate demand for immunization. To improve immunization coverage, address inequity, and support polio eradication, GHD is committed to generate demand for vaccination among nomad populations and underserved areas by engaging religious leaders and community elders in building trust in immunization services and create demand for immunization services.

OUTCOMES BY NUMBERS

500 religious leaders and community elders trained to build trust between community and immunization program in Afghanistan

375 EPI frontline workers trained on IPC in Afghanistan.

GHD|EMPHNET Information: Global Health Development (GHD) works at achieving its mission by responding to public health needs with deliberate efforts that allow for health promotion and disease prevention.

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